PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032

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Effective on 12/08		Complete if Known					
Fees pursuant to the Consolidated Approp	Application Number		10/782,882-Conf. #7102				
FEE TRANS	Filing Date February 23		ebruary 23, 2	2004			
		First Named Inv	First Named Inventor		Craig FRENCH		
For FY 2008		Examiner Name		G. M. Lupino			
X Applicant claims small entity status. See 37 CFR 1.27		Art Unit		3652			
TOTAL AMOUNT OF PAYMENT (\$) 50.00		Attorney Docket No. 3		3426-0108P			
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch,							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
x Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
FI		EARCH FEES	EXAMIN	ATION FEES			
Application Type Fee (\$	Small Entity) Fee (\$) Fee (Small Entity \$) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)	
Utility 310	155 510		210	105			
Design 210	105 100	50	130	65	***************************************		
Plant 210	105 310	155	160	80			
Reissue 310	155 510	255	620	310			
Provisional 210	105	0	0	0			
2. EXCESS CLAIM FEES						Small Entity	
Fee Description Fee (\$) Fee (\$)							
Each claim over 20 (including Reissues)					50	25	
Each independent claim over 3 (including Reissues)					210	105	
Multiple dependent claims 370					185		
		Paid (\$)					
	\$25 =	\$50	Fee	<u>: (\$)</u>	ee Paid (\$)	ŧ į	
HP = highest number of total claims paid for	•	During (A)				-	
Indep. Claims 2 -3= 0		Paid (\$)					
HP = highest number of independent claims							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheet		additional 50 or fract	tion thereof	Fee (\$)	Fee P	aid (\$)	
100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S) Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): Excess Claim Fee 50.00							
SUBMITTED BY A A A A A A A A A A A A A A A A A A							
Signature (Carrey ()	Lean S	Registration No. (Attorney/Agent) 39,538			Telephone (703) 205-8000		
Name (Print/Type) / James T. Eller, Jr.	1/			Date (October 19) , 2007	